## DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

## **Provider Inspection Summary**

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS CNA (NONAMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

## **Facility Information**

Facility Name: WEST CARE TERRACE 1721 (410536)

Address: 1721 WESTMINSTER DR, GREEN BAY, WI 54302

License Status: REGULAR

Licensed/Certified/Registered 06/01/1998

Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5240

**Survey History** 

Survey ID: 0094101 End Date: 02/11/2005 Type: OTHER Purpose: DESK REVIEW

**Results:** ENFORCEMENT ACTION

Statement of Deficiency: #10007082 Served 04/08/2005

Deficiencies Cited Subject Area Subject Area Corrected

50.065(6)(b) CREDENTIALED CAREGIVERS 06/02/2005 Yes

Survey ID: 0092717 End Date: 06/04/2004 Type: ABBREVIATED Purpose: SURVEY

**Results:** STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10006970 Served 06/12/2004

<u>Compliance</u>

Deficiencies Cited Subject Area <u>Verified</u> Corrected

<u>Deficiencies Cited</u> <u>Subject Area</u> <u>Verified</u> <u>Correct</u>

83.14(7)(b) CONTINUING EDUCATION

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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**Enforcement History** 

Date: 04/01/2005

SOD #10007082

Appealed: No

**Sanctions** 

COMPLY WITH REQUIREMENT

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